

Crosswalk Management System

Report	REPORT CROSSWALK TO STATE
Filename	\\SMDI\Hp8000_2.Synectics
Run by	CWMS
Report Date	10-APR-02 11:55

Crosswalk Report

CWMS

Page 2 of 30

Status : FN Substance Abuse and Mental Health Services Administration

Media ID : MATS Office of Applied Studies

Start Date : 01-JAN-90

End Date :

Follow-up :

Maine's Treatment Episode Data Set

Version : 1

K = Key Field

System

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

1	System Transaction Type	-	System Transaction Type Added To Each Record
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K 2	State Code	ME	FIPS Code Added to Each Record
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3	Reporting Date	-	Month and Year of Submission Added to Each Record
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Crosswalk Report

CWMS

Page 3 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

K 1	Provider Identifier	F	Federal Identifier Code
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K 2	Client Identifier (Admission)	A-B	Client Code
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K 3	Co-Dependent/Collateral	33	Primary Presenting Problem
2	No	01	Substance Abuse
1	Yes	02	Affected/Co-Dependent Child
1	Yes	03	Affected/Co-Dependent Adult Child
1	Yes	04	Affected/Co-Dependent Spouse/Partner
1	Yes	05	Affected/Co-Dependent Parent
1	Yes	06	Affected/Co-Dependent Other

No longer effective as of: 12-31-1995

K 3	Co-Dependent/Collateral	46	Primary Presenting Problem..
2	No	01	Substance Abuse Only
1	Yes	02	Affected/Co-Dependent
2	No	03	Evaluation Only
2	No	98	Unknown

K 4	Client Transaction Type	-	-
A	Initial Admission	-	Initial Admission

K 5	Date of Admission	08	Initial Admission Date
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No longer effective as of: 12-31-1995

K 5	Date of Admission	I	Admission Date
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Crosswalk Report

CWMS

Page 4 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

6	Number of Prior Treatment Episodes		31	Prior Treatment Episodes Substance	
	0	0		00	None
	1	1		01	One
	2	2		02	Two
	3	3		03	Three
	4	4		04	Four
	5	Or More		05	Five or More
No longer effective as of: 12-31-1995					

6	Number of Prior Treatment Episodes		02	# Prior Treatment Episodes	
	0	0		00	None
	1	1		01	One
	2	2		02	Two
	3	3		03	Three
	4	4		04	Four
	5	Or More		05	Five or More
	7	Unknown		98	Unknown

Crosswalk Report

CWMS

Page 5 of 30

Maine's Treatment Episode Data Set Version : 1

K = Key Field

Minimum

Maine

Item

Item

Value

State System Data

No. Treatment Episode Data Set

7	Principal Source of Referral	32	Primary Referral Source
01	Individual (includes self-referral))	01	Self
01	Individual (includes self-referral))	02	Family Member
05	Employer/EAP	03	Employer
02	Alcohol/Drug Abuse Provider	04	Substance Abuse Professional
02	Alcohol/Drug Abuse Provider	05	Substance Abuse Agency
03	Other Health Care Provider	06	Physician
06	Other Community Referral	07	Other Professional
06	Other Community Referral	09	Adult Protective Services DHS
06	Other Community Referral	10	Child Protective Services DHS
06	Other Community Referral	11	Substitute Care Services DHS
07	Court/Criminal Justice/DUI/DWI	12	Probation/Parole/State of Maine
07	Court/Criminal Justice/DUI/DWI	13	Correctional Facility, Maine
07	Court/Criminal Justice/DUI/DWI	14	County Jails
03	Other Health Care Provider	15	Augusta/Bangor Mental Health Institute
03	Other Health Care Provider	16	Mental Health Agency
01	Individual (includes self-referral))	17	Friend
05	Employer/EAP	18	EAP
04	School (Educational)	19	SAP
07	Court/Criminal Justice/DUI/DWI	20	State/Federal Court
07	Court/Criminal Justice/DUI/DWI	21	Formal Adjudication Process
06	Other Community Referral	22	Self Help Group
03	Other Health Care Provider	23	Hospital
04	School (Educational)	24	School
97	Unknown	99	Other
No longer effective as of: 12-31-1995			

Crosswalk Report

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

No.	Treatment Episode Data Set
1	1996-1997
2	1997-1998
3	1998-1999
4	1999-2000
5	2000-2001
6	2001-2002
7	2002-2003
8	2003-2004
9	2004-2005
10	2005-2006
11	2006-2007
12	2007-2008
13	2008-2009
14	2009-2010
15	2010-2011
16	2011-2012
17	2012-2013
18	2013-2014
19	2014-2015
20	2015-2016
21	2016-2017
22	2017-2018
23	2018-2019
24	2019-2020
25	2020-2021
26	2021-2022
27	2022-2023
28	2023-2024
29	2024-2025
30	2025-2026
31	2026-2027
32	2027-2028
33	2028-2029
34	2029-2030
35	2030-2031
36	2031-2032
37	2032-2033
38	2033-2034
39	2034-2035
40	2035-2036
41	2036-2037
42	2037-2038
43	2038-2039
44	2039-2040
45	2040-2041
46	2041-2042
47	2042-2043
48	2043-2044
49	2044-2045
50	2045-2046
51	2046-2047
52	2047-2048
53	2048-2049
54	2049-2050
55	2050-2051
56	2051-2052
57	2052-2053
58	2053-2054
59	2054-2055
60	2055-2056
61	2056-2057
62	2057-2058
63	2058-2059
64	2059-2060
65	2060-2061
66	2061-2062
67	2062-2063
68	2063-2064
69	2064-2065
70	2065-2066
71	2066-2067
72	2067-2068
73	2068-2069
74	2069-2070
75	2070-2071
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91	2086-2087
92	2087-2088
93	2088-2089
94	2089-2090
95	2090-2091
96	2091-2092
97	2092-2093
98	2093-2094
99	2094-2095
100	2095-2096
101	2096-2097
102	2097-2098
103	2098-2099
104	2099-2100
105	2100-2101
106	2101-2102
107	2102-2103
108	2103-2104
109	2104-2105
110	2105-2106
111	2106-2107
112	2107-2108
113	2108-2109
114	2109-2110
115	2110-2111
116	2111-2112
117	2112-2113
118	2113-2114
119	2114-2115
120	2115-2116
121	2116-2117
122	2117-2118
123	2118-2119
124	2119-2120
125	2120-2121
126	2121-2122
127	2122-2123
128	2123-2124
129	2124-2125
130	2125-2126
131	2126-2127
132	2127-2128
133	2128-2129
134	2129-2130
135	

Value

State System Data

7	Principal Source of Referral	01	Referral
01	Individual (includes self-referral))	01	Self
01	Individual (includes self-referral))	02	Family Member
02	Alcohol/Drug Abuse Provider	04	Sub Abuse Professional
02	Alcohol/Drug Abuse Provider	05	Sub Abuse Agency
03	Other Health Care Provider	06	Physician
03	Other Health Care Provider	07	Other Professional
07	Court/Criminal Justice/DUI/DWI	08	DEEP
06	Other Community Referral	09	Adult Protective Services -DHS
06	Other Community Referral	10	Child Protective Services -DHS
06	Other Community Referral	11	Substitute Care Services
07	Court/Criminal Justice/DUI/DWI	12	Probation/Parole State of Maine
07	Court/Criminal Justice/DUI/DWI	13	Correctional Facility Maine
07	Court/Criminal Justice/DUI/DWI	14	County Jails
03	Other Health Care Provider	15	Augusta/Bangor MH Institute
03	Other Health Care Provider	16	Mental Health Agency
01	Individual (includes self-referral))	17	Friend
05	Employer/EAP	18	EAP
05	Employer/EAP	19	SAP
07	Court/Criminal Justice/DUI/DWI	20	State/Federal Court
07	Court/Criminal Justice/DUI/DWI	21	Formal Adjudication Process
06	Other Community Referral	22	Self Help Groups
03	Other Health Care Provider	23	Hospital
04	School (Educational)	24	School
03	Other Health Care Provider	25	AIDS Outreach Worker
06	Other Community Referral	99	Other

8 Date of Birth

L

Date of Birth

No longer effective as of: 12-31-1995

8 Date of Birth

A

Date of Birth..

Crosswalk Report

CWMS

Page 7 of 30

Maine's Treatment Episode Data Set Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

9	Sex	K	Sex
1	Male	01	Male
2	Female	02	Female
No longer effective as of: 12-31-1995			

9	Sex	C	Gender
1	Male	01	Male
2	Female	02	Female
8	Not Collected	98	Not Collected

10	Race	02	Race
05	White	01	White
04	Black or African American	02	Black
02	American Indian (Other than Alaskan Native)	03	American Indian
03	Asian or Pacific Islander	04	Asian or Pacific Islander
01	Alaska Native (Aleut, Eskimo, Indian)	05	Alaskan Native
20	Other	99	Other
No longer effective as of: 12-31-1995			

10	Race	04	Race..
05	White	01	White
04	Black or African American	02	Black or African American
01	Alaska Native (Aleut, Eskimo, Indian)	03	American Indian or Alaskan Native
02	American Indian (Other than Alaskan Native)	03	American Indian or Alaskan Native
13	Asian	04	Asian
23	Native Hawaiians or Other Pacific Islanders	05	Native Hawaiian or Other Pacific Islander
97	Unknown	98	Unknown
20	Other	99	Other

Crosswalk Report

CWMS

Page 8 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

Value

State System Data

No. Treatment Episode Data Set

11	Ethnicity	03	Ethnicity
97	Unknown	-	-
05	Not of Hispanic Origin	01	Not of Hispanic Origin
01	Puerto Rican	02	Puerto Rican
02	Mexican	03	Mexican
03	Cuban	04	Cuban
04	Other Specific Hispanic	05	Other Hispanic
05	Not of Hispanic Origin	06	Franco-American
05	Not of Hispanic Origin	07	Micmac
05	Not of Hispanic Origin	08	Passamaquoddy
05	Not of Hispanic Origin	09	Maliseet
05	Not of Hispanic Origin	10	Penobscot
No longer effective as of: 05-31-1990			

11	Ethnicity	03	Ethnicity
05	Not of Hispanic Origin	01	Not of Hispanic Origin
01	Puerto Rican	02	Puerto Rican
02	Mexican	03	Mexican
03	Cuban	04	Cuban
04	Other Specific Hispanic	05	Other Hispanic
05	Not of Hispanic Origin	06	Franco-American
05	Not of Hispanic Origin	07	Micmac
05	Not of Hispanic Origin	08	Passamaquoddy
05	Not of Hispanic Origin	09	Maliseet
05	Not of Hispanic Origin	10	Penobscot
No longer effective as of: 05-31-1990			

Crosswalk Report

CWMS

Page 9 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

11 Ethnicity

05 Not of Hispanic Origin
01 Puerto Rican
02 Mexican
03 Cuban
04 Other Specific Hispanic
98 Not Collected

05 Ethnicity..

01 Not Hispanic or Latino
02 Hispanic or Latino
02 Hispanic or Latino
02 Hispanic or Latino
02 Hispanic or Latino
98 Not Collected

12 Education

01- Highest School Grade in Number
25 of Years (12=GED)
97 Unknown

06 Education Completed

00-20 00-20 (GED=12)
BLAN Unknown
K

No longer effective as of: 12-31-1995

Crosswalk Report

CWMS

Page 10 of 30

Maine's Treatment Episode Data Set Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

12 Education

00 Less Than One Grade Completed
01- Highest School Grade in Number
25 of Years (12=GED)
01- Highest School Grade in Number
25 of Years (12=GED)
01- Highest School Grade in Number
25 of Years (12=GED)
01- Highest School Grade in Number
25 of Years (12=GED)
01- Highest School Grade in Number
25 of Years (12=GED)
01- Highest School Grade in Number
25 of Years (12=GED)
01- Highest School Grade in Number
25 of Years (12=GED)
01- Highest School Grade in Number
25 of Years (12=GED)
01- Highest School Grade in Number
25 of Years (12=GED)
98 Not Collected

18 Education Completed..

00 Knidergarten or None
01-11 First Thru Eleventh respectively
12 Tewlfth/GED
13 Freshman College
14 Sophomore
15 Junior College
16 Senior College
17 Masters 1
18 Masters 2
19 PHD 1
20 PHD 2
98 Not Collected

13 Employment Status

01 Full Time
02 Part Time
02 Part Time
03 Unemployed
04 Not in Labor Force
04 Not in Labor Force

09 Employment Status

01 Full Time
02 Part Time
03 Irregular
04 Not Employed
05 Unemployed
06 Not In Labor Force

No longer effective as of: 12-31-1995

Crosswalk Report

CWMS

Page 11 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

Value

State System Data

No. Treatment Episode Data Set

13 Employment Status

01 Full Time
02 Part Time
02 Part Time
03 Unemployed
03 Unemployed
04 Not in Labor Force
04 Not in Labor Force
04 Not in Labor Force
04 Not in Labor Force
98 Not Collected

18 Employment Status..

01 Full Time:>35 Hours
02 Part Time:17 -34 Hours
03 Irregular:<17 Hours
04 Unemployed has sought work
05 Unemployed has not sought work
06 Not In Labor Force
07 Full Time Volunteer
08 Part Time Volunteer
09 Irregular Volunteer
98 Not Collected

Crosswalk Report

CWMS

Page 12 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiart-14C)	34	Drugs Used Inappropriately or Abused by Client That Led to Admission
12	Other Stimulants	-	-
01	None	00	None
02	Alcohol	01	Alcohol
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preperations)	02	Marijuana/Hashish
03	Cocaine, Crack	03	Cocaine/Crack
14	Other Tranquilizers	04	Tranquilizers
15	Barbiturates	05	Barbiturates
16	Other Sedatives or Hypnotics	06	Other Sedatives or Hypnotics
10	Methamphetamine	07	Methamphetamine
11	Other Amphetamines	08	Other Amphetamines
08	PCP	09	PCP
09	Other Hallucinogens	10	LSD
09	Other Hallucinogens	11	Other Hallucinogens
17	Inhalants	12	Inhalants
05	Heroin	13	Heroin
06	Non-Prescription Methadone	14	No Rx-Methadone
07	Other Opiates and Synthetics	15	Fentanyl Compounds
07	Other Opiates and Synthetics	16	Merperidine Analogues
07	Other Opiates and Synthetics	17	Hydromorphone
07	Other Opiates and Synthetics	18	Other Opiates and Synthetics
13	Benzodiazepine	19	Diazepam
13	Benzodiazepine	20	Alprazolam
20	Other	21	Designer Drug, Not Elsewhere Classified
18	Over-the-Counter	22	Over the Counter
20	Other	23	Other
98	Not Collected	99	Affected Other/Codependent

No longer effective as of: 12-31-1995

Crosswalk Report

CWMS

Page 13 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiart-14C)	33,34,35	Drugs Used Inappropriately, Secondary, Tertiary
01	None	00	None
02	Alcohol	01	Alcohol
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preparations)	02	Marijuana/Hashish
03	Cocaine, Crack	03	Cocaine/Crack
05	Heroin	04	Heroin
06	Non-Prescription Methadone	05	Non Rx-Methadone
07	Other Opiates and Synthetics	06	Other Opiates and Synthetics
08	PCP	07	PCP
09	Other Hallucinogens	08	Other Hallucinogens LSD,DMS,STP, etc
10	Methamphetamine	09	Methamphetamines
11	Other Amphetamines	10	Other Amphetamines
12	Other Stimulants	11	Other Stimulants
13	Benzodiazepine	12	Benzodiazepines
14	Other Tranquilizers	13	Other Trnaquilizers
15	Barbiturates	14	Barbiturates
16	Other Sedatives or Hypnotics	15	Other Sedatives or Hypnotics
17	Inhalants	16	Inhalants
18	Over-the-Counter	17	Over the Counter
20	Other	18	Other
98	Not Collected	98	Not Collected

Crosswalk Report

CWMS

Page 14 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

15	Usual Route of Administration (Primary-15A, Secondary-15B, Tertiar-15C)	40	Route of Administration
97	Unknown	-	Unknown
98	Not Collected	00	Not Applicable
01	Oral	01	Swallowed
02	Smoking	02	Smoked
03	Inhalation	03	Snorted
03	Inhalation	04	Sniffed
04	Injection (IV or intramuscular)	05	Skin Popped
98	Not Collected	99	Affected Other/Codependent
No longer effective as of: 12-31-1995			

15	Usual Route of Administration (Primary-15A, Secondary-15B, Tertiar-15C)	41,42,43	Primary Route of Administration, Secondary, Tertiary
98	Not Collected	00	Not Applicable
01	Oral	01	Oral
02	Smoking	02	Smoking
03	Inhalation	03	Inhalation
04	Injection (IV or intramuscular)	04	Injection
20	Other	05	Other
98	Not Collected	98	Not Collected
98	Not Collected	99	Affected/Co-Dependent

Crosswalk Report

CWMS

Page 15 of 30

Maine's Treatment Episode Data Set Version : 1

K = Key Field

Minimum

Maine

Item

Item

Value

State System Data

No. Treatment Episode Data Set

16	Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C)	37	Frequency of Use
98	Not Collected	00	Not Applicable
01	No past month use	01	No Use Past 3 Months
01	No past month use	02	Not Use Past Month
02	1-3 times in past month	03	Once Per Month
02	1-3 times in past month	04	2-3 Days Per Month
03	1-2 times per week	05	Once Per Week
04	3-6 times per week	06	2-3 Days Per Week
04	3-6 times per week	07	4-6 Days Per Week
05	Daily	08	Daily
05	Daily	09	2-3 Times Daily
05	Daily	10	More Than 3 Times Daily
98	Not Collected	99	Affected Other/Codependent

No longer effective as of: 12-31-1995

16	Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C)	37,38,39	PrimaryFrequency of Use, Secondary, Tertiary
98	Not Collected	00	Not Applicable
01	No past month use	02	No Use Past Month
02	1-3 times in past month	03	Once in Last 30 days
02	1-3 times in past month	04	2-3 days per month
03	1-2 times per week	05	Once per Week
04	3-6 times per week	06	2-3 days per week
04	3-6 times per week	07	4-6 days per week
05	Daily	08	Daily
98	Not Collected	98	Not Collected
98	Not Collected	99	Affected/Co-dependent

Crosswalk Report

CWMS

Page 16 of 30

Maine's Treatment Episode Data Set Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	43	Age of First Use
98	Not Collected	00	Not Applicable
00-96	Indicates The Age at First Use	01-96	Range of Age, Newborn = 01
97	Unknown	98	Unknown
No longer effective as of: 12-31-1995			

17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	45,46,47	Primary Age of First Use, Secondary, Tertiary
98	Not Collected	00	None
00-96	Indicates The Age at First Use	01-XX	Age of client
98	Not Collected	98	Not Collected

K 18	Type of Services	G	Primary Service Code
01	Hospital Inpatient (Detox, 24 hour Service)	01	Hospital Inpatient
02	Free-standing Residential (Detox, 24 hour Service)	02	Free Standing Inpatient
03	Hospital (other than detox)	03	Hospital
04	Short-term, (30 days or fewer)	04	Short Term
05	Long-term, (more than 30 days)	05	Long Term Extended Care
05	Long-term, (more than 30 days)	06	Long Term Transitional Residential
05	Long-term, (more than 30 days)	07	Long Term Extended Shelter
07	Non-Intensive Outpatient	08	Non Intensive Outpatient
07	Non-Intensive Outpatient	09	Psychoeducational Group
07	Non-Intensive Outpatient	10	Relapse Prevention Group
06	Intensive Outpatient	11	Intensive Outpatient
08	Ambulatory Detoxification	12	Detoxification
05	Long-term, (more than 30 days)	15	Adolescent Resident Rehabilitation
07	Non-Intensive Outpatient	18	Adolescent Outpatient
07	Non-Intensive Outpatient	19	Group Demonstration Project
No longer effective as of: 12-31-1995			

Crosswalk Report

CWMS

Page 17 of 30

Maine's Treatment Episode Data Set Version : 1

K = Key Field

Minimum

Maine

Item	Item	Value	State System Data
No.	Treatment Episode Data Set		
K 18	Type of Services	H	Primary Service Code..
01	Hospital Inpatient (Detox, 24 hour Service)	01	Hospital Inpatient
02	Free-standing Residential (Detox, 24 hour Service)	02	Free Stand Hosp
03	Hospital (other than detox)	03	Hosp (Not Detox)
04	Short-term, (30 days or fewer)	04	Short Term
05	Long-term, (more than 30 days)	05	Extended Care
05	Long-term, (more than 30 days)	06	Half Way House
05	Long-term, (more than 30 days)	07	Extended Shelter
07	Non-Intensive Outpatient	08	Non-Intensive OutPatient
06	Intensive Outpatient	09	Day Treatment
06	Intensive Outpatient	11	Intensive OutPatient
08	Ambulatory Detoxification	12	Detoxification
05	Long-term, (more than 30 days)	15	Adolescent Residential
07	Non-Intensive Outpatient	18	Adolescent OutPatient
01	Hospital Inpatient (Detox, 24 hour Service)	21	(CMI) Hospital Inpatient
02	Free-standing Residential (Detox, 24 hour Service)	22	(CMI) Free Stand OutPatient
03	Hospital (other than detox)	23	(CMI) Hospital
04	Short-term, (30 days or fewer)	24	(CMI) Short Term
05	Long-term, (more than 30 days)	25	(CMI) Extended Care
05	Long-term, (more than 30 days)	26	(CMI) Half Way House
05	Long-term, (more than 30 days)	27	(CMI) Extended Shelter
05	Long-term, (more than 30 days)	28	(CMI) Adolescent Residential Rehab
07	Non-Intensive Outpatient	29	(CMI) Non-Intensive OutPatient
06	Intensive Outpatient	32	(CMI) Intensive OutPatient
08	Ambulatory Detoxification	33	(CMI) Detoxification
07	Non-Intensive Outpatient	35	(CMI) Adolescent OutPatient
06	Intensive Outpatient	38	Adolescent Intensive OutPatient
06	Intensive Outpatient	39	(CMI) Adolescent Intensive OutPatient
07	Non-Intensive Outpatient	40	Methadone
01	Hospital Inpatient (Detox, 24 hour Service)	42	Methadone Detox

Crosswalk Report

CWMS

Page 18 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

K 18	Type of Services	H	Primary Service Code..
05	Long-term, (more than 30 days)	44	Consumer Run Residence
05	Long-term, (more than 30 days)	45	(CMI) Consumer Run Residence
07	Non-Intensive Outpatient	46	(CMI) Methadone
01	Hospital Inpatient (Detox, 24 hour Service)	47	(CMI) Methadone Detox

19	Use of Methadone Planned/Actual	48	Use of Methadone Planned as Part of Treatment
1	Yes	01	Yes
2	No	02	No

No longer effective as of: 12-31-1995

19	Use of Methadone Planned/Actual	53	Use of Methadone Planned as Part of Treatment..
1	Yes	01	Yes
2	No	02	No
8	Not Collected	98	Not Collected

Crosswalk Report

CWMS

Page 19 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item No.	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	-	Not Collected	
2	Detail Drug Code, Secondary	-	Not Collected	
3	Detail Drug Code, Tertiary	-	Not Collected	
4	DSM Diagnosis	-	Not Collected	
5	Psychiatric Problem in Addition to Alcohol or Drug Problem	24	Does Client Have Concurrent Psychiatric Problem?	
7	Unknown	-	-	
1	Yes	01	Yes	
2	No	02	No	
No longer effective as of: 05-31-1990				
5	Psychiatric Problem in Addition to Alcohol or Drug Problem	24	Does Client Have Concurrent Psychiatric Problem?	
1	Yes	01	Yes	
2	No	02	No	
6	Pregnant at Time of Admission	23	Pregnant at Time of Admission	
7	Unknown	-	-	
1	Yes	01	Yes	
2	No	02	No	
No longer effective as of: 05-31-1990				
6	Pregnant at Time of Admission	23	Pregnant at Time of Admission	
1	Yes	01	Yes	
2	No	02	No	

Crosswalk Report

CWMS

Page 20 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item

Item

Value

State System Data

No. Treatment Episode Data Set

7	Veteran Status	05	Veteran Status
7	Unknown	-	-
1	Yes	01	Yes
2	No	02	No
No longer effective as of: 05-31-1990			

7	Veteran Status	05	Veteran Status
1	Yes	01	Yes
2	No	02	No

8	Living Arrangements	08	Living Arrangements
97	Unknown	-	-
03	Independent Living	01	Independent Living, Alone, etc.
03	Independent Living	02	Independent Living, With Others
02	Dependent Living	03	Dependent Living, With Others
01	Homeless	04	Homeless
No longer effective as of: 05-31-1990			

8	Living Arrangements	08	Living Arrangements
03	Independent Living	01	Independent Living, Alone, etc.
03	Independent Living	02	Independent Living, With Others
02	Dependent Living	03	Dependent Living, With Others
01	Homeless	04	Homeless

Crosswalk Report

CWMS

Page 21 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

9	Primary Source of Income/Support	13	Primary Source of Household Income/Support
97	Unknown	-	-
21	None	00	None
01	Wages/Salary	01	Wages
03	Retirement/Pension	02	Retirement
20	Other	03	Alimony
20	Other	04	Investments
02	Public Assistance	05	Food Stamps
02	Public Assistance	06	AFDC
02	Public Assistance	07	SSI
04	Disability	08	Disablity,Other
02	Public Assistance	09	Town Welfare
20	Other	10	Child Support
20	Other	11	Unemployment Benefits
03	Retirement/Pension	12	Social Security
01	Wages/Salary	13	Self Employed
20	Other	14	Dealing Drugs
01	Wages/Salary	15	Commissions
20	Other	16	Worker's Compensation
20	Other	99	Other

No longer effective as of: 05-31-1990

Crosswalk Report

CWMS

Page 22 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

9	Primary Source of Income/Support	13	Primary Source of Household Income/Support
21	None	00	None
01	Wages/Salary	01	Wages
03	Retirement/Pension	02	Retirement
20	Other	03	Alimony
20	Other	04	Investments
02	Public Assistance	05	Food Stamps
02	Public Assistance	06	AFDC
02	Public Assistance	07	SSI
04	Disability	08	Disablity,Other
02	Public Assistance	09	Town Welfare
20	Other	10	Child Support
20	Other	11	Unemployment Benefits
03	Retirement/Pension	12	Social Security
01	Wages/Salary	13	Self Employed
20	Other	14	Dealing Drugs
01	Wages/Salary	15	Commissions
20	Other	16	Worker's Compensation
20	Other	99	Other

Crosswalk Report

CWMS

Page 23 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

10	Health Insurance	58	Primary Health Insurance
97	Unknown	-	-
21	None	00	None
04	Medicaid	01	Medicaid
03	Medicare	02	Medicare
02	Blue Cross/Blue Shield	03	Blue Cross/Blue Shield
20	Other (e.g. TriCare, Champus)	04	VA
06	Health Maintenance Organization (HMO)	05	HMO
01	Private Insurance	06	Private Health Ins Other
20	Other (e.g. TriCare, Champus)	07	Other
97	Unknown	08	Unknown
No longer effective as of: 05-31-1990			

10	Health Insurance	58	Primary Health Insurance
21	None	00	None
04	Medicaid	01	Medicaid
03	Medicare	02	Medicare
02	Blue Cross/Blue Shield	03	Blue Cross/Blue Shield
20	Other (e.g. TriCare, Champus)	04	VA
06	Health Maintenance Organization (HMO)	05	HMO
01	Private Insurance	06	Private Health Ins Other
20	Other (e.g. TriCare, Champus)	07	Other
97	Unknown	08	Unknown

Crosswalk Report

CWMS

Page 24 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

11	Expected/Actual Primary Source of Payment	57	Primary Expected Source of Payment
97	Unknown	-	-
08	No Charge (Free, CHarity, Special Research ot Teaching)	01	OSA
05	Other Government Payments	02	Human Services
05	Other Government Payments	03	Dept of Corrections
05	Other Government Payments	04	DHS
01	Self-Pay	05	Client
01	Self-Pay	06	Client's Spouse
01	Self-Pay	07	Client's Parent/Guardian
04	Medicaid	08	Medicaid
03	Medicare	09	Medicare
02	Blue Cross/Blue Shield	10	Blue Cross/Blue Sheild
07	Other Health Insurance Companies	11	HMO
07	Other Health Insurance Companies	12	Other Private Insurance
05	Other Government Payments	13	Town Assistance
06	Worker's Compensation	14	Worker's Compensation
05	Other Government Payments	15	DMHMR
09	Other	99	Other

No longer effective as of: 05-31-1990

Crosswalk Report

CWMS

Page 25 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

11	Expected/Actual Primary Source of Payment	57	Primary Expected Source of Payment
08	No Charge (Free, CHarity, Special Research ot Teaching)	01	OSA
05	Other Government Payments	02	Human Services
05	Other Government Payments	03	Dept of Corrections
05	Other Government Payments	04	DHS
01	Self-Pay	05	Client
01	Self-Pay	06	Client's Spouse
01	Self-Pay	07	Client's Parent/Guardian
04	Medicaid	08	Medicaid
03	Medicare	09	Medicare
02	Blue Cross/Blue Shield	10	Blue Cross/Blue Sheild
07	Other Health Insurance Companies	11	HMO
07	Other Health Insurance Companies	12	Other Private Insurance
05	Other Government Payments	13	Town Assistance
06	Worker's Compensation	14	Worker's Compensation
05	Other Government Payments	15	DMHMR
09	Other	99	Other

Crosswalk Report

CWMS

Page 26 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

12	Detailed Not in Labor Force	11	Employment Factor
97	Unknown	-	-
98	Not Collected	01	Working Now
02	Student	02	Student
01	Homemaker	03	Homemaker
03	Retired	04	Retired
04	Disabled	05	Unable to Work for Physical or Psychological Reasons
05	Inmate of Institution (Prison or Institution - keeps people out of work force)	06	Inmate of Institution
06	Other	07	Seasonal Worker
06	Other	08	Temporary Layoff
No longer effective as of: 05-31-1990			

12	Detailed Not in Labor Force	11	Employment Factor
98	Not Collected	01	Working Now
02	Student	02	Student
01	Homemaker	03	Homemaker
03	Retired	04	Retired
04	Disabled	05	Unable to Work for Physical or Psychological Reasons
05	Inmate of Institution (Prison or Institution - keeps people out of work force)	06	Inmate of Institution
06	Other	07	Seasonal Worker
06	Other	08	Temporary Layoff

Crosswalk Report

CWMS

Page 27 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

13	Detailed Criminal Justice Referral Categories	32	Primary Referral Source
03	Probation/Parole	12	Probation/Parole/State of Maine
06	Prison	13	Correctional Facility, Maine
06	Prison	14	County Jails
01	State/Federal Court	20	State/Federal Court
02	Other Court (Not State or Federal)	21	Formal Adjudication Process
07	DUI/DWI	25	Non-Aggravated First Offender
07	DUI/DWI	26	Aggravated First Offender
07	DUI/DWI	27	Multiple Offender
No longer effective as of: 05-31-1993			

13	Detailed Criminal Justice Referral Categories	32	Primary Referral Source
03	Probation/Parole	12	Probation/Parole/State of Maine
06	Prison	13	Correctional Facility, Maine
06	Prison	14	County Jails
01	State/Federal Court	20	State/Federal Court
02	Other Court (Not State or Federal)	21	Formal Adjudication Process
07	DUI/DWI	25	Non-Aggravated First Offender
07	DUI/DWI	26	Aggravated First Offender
07	DUI/DWI	27	Multiple Offender
07	DUI/DWI	28	.02 Teen Offender

Crosswalk Report

CWMS

Page 28 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

14	Marital Status	01	Current Marital Status
97	Unknown	-	-
02	Now Married or Cohabiting	01	Married
02	Now Married or Cohabiting	02	Remarried
04	Divorced	03	Divorced
05	Widowed	04	Widowed
03	Separated (legally or otherwise absent)	05	Separated
01	Never Married	06	Single/Never Married
No longer effective as of: 05-31-1990			

14	Marital Status	01	Current Marital Status
02	Now Married or Cohabiting	01	Married
02	Now Married or Cohabiting	02	Remarried
04	Divorced	03	Divorced
05	Widowed	04	Widowed
03	Separated (legally or otherwise absent)	05	Separated
01	Never Married	06	Single/Never Married
15	Days Waiting to Enter Treatment	-	Not Collected

Crosswalk Report

CWMS

Page 29 of 30

Maine's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge

Maine

Item

Item

No. Treatment Episode Data Set

Value

State System Data

104	Provider ID at Discharge	F	Federal Identifier Code
105	Client Identifier	A-B	Client Code
106	Co-Dependent/Collateral At Discharge	46	Primary Presenting Problem..
109	Service at Discharge	32	Primary Referral Source
146	Date of Last Contact	J	Last Face to Face Contact
147	Date of Discharge	J	Last Face to Face Contact

Crosswalk Management System

REPORT CROSSWALK TO STATE

End of Report